



## Municipal GIC Retiree Dental Enrollment and Change Form

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PLEASE TYPE OR PRINT CLEARLY

01

Insured's GIC-ID (usually Soc. Sec.#) — —	Sex Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of Birth — / — / —	(For Municipal use only) Agency/Division # —
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Name: Last	First	M.I.
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Address (Number and Street)	This is a new Address: <input type="checkbox"/>
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City	State	Zip Code	Home Phone No. ( )
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02	NEW ENROLLMENT <input type="checkbox"/>	CHANGE <input type="checkbox"/>	CANCEL COVERAGE <input type="checkbox"/>
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Effective Date: / /	Type of Coverage: Individual <input type="checkbox"/> Family <input type="checkbox"/>	Date of Retirement: / /
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### PLEASE READ CAREFULLY: Important Coverage and Eligibility Notes

- If you don't sign up for coverage when you are first eligible, you will not be able to enroll until the next annual enrollment period.
- If you have family coverage and switch to an individual plan, your spouse and/or your eligible dependents can never rejoin. If you sign up for individual or family coverage and decide to cancel, you can never rejoin the plan.

### SPOUSE/DEPENDENT INFORMATION

CHECK ONE: ☐ NEW MEMBER ☐ ADDITION ☐ DELETION ☐ CORRECTION

List below all family members, including your spouse, who will be covered under your dental plan. Please provide all Social Security Numbers (required under Federal Law Section 111) and exact dates of birth for each dependent. Attach separate sheet if additional space is required. Coverage for children ends at age 19; to continue their coverage, complete and return to the GIC a Dependent Ages 19 to 26 Enrollment Form. The Group Insurance Commission requires you to provide a copy of a marriage certificate, birth certificate, legal separation, divorce decree, or certificate of appointment as legal guardian for each person you list as a dependent.

Last Name	First	M.I.	Relationship	Date of Birth	Sex	Social Security Number (required)
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Reason for addition or deletion: \_\_\_\_\_ Effective date: \_\_\_\_\_

**Deduction and Coverage Authorization:** I authorize my pension authority to deduct from my pension check the amount required for the dental coverage I have selected. If I am a survivor on direct bill, I understand that I will be billed for this coverage.

X \_\_\_\_\_  
Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

X \_\_\_\_\_  
Signature of Authorized Official \_\_\_\_\_ Date \_\_\_\_\_

### FOR GIC USE ONLY

Entered	Verified	Cross Ref. #
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RETURN COMPLETED RETIREE DENTAL FORM TO YOUR MUNICIPAL BENEFITS OFFICE

666/0178 City of Melrose  
Polina Latta  
HR Manager-Human Resources  
562 Main Street  
Melrose, MA 02176  
(781) 979-4145

666/0138 Town of Hopedale  
Stephanie L'Etalien  
Treasurer  
78 Hopedale Street  
Hopedale, MA 01747  
(508) 634-2203 x218

666/0229 City of Peabody  
Linda Cavallon  
Pension Administrator  
24 Lowell Street  
Peabody, MA 01960  
(978) 538-5911

666/0187 Town of Millis  
Jeff Cannon  
Treasurer  
900 Main Street  
Millis, MA 02054  
(508) 376-7091

666/0236 City of Pittsfield  
Nancy Dinofrio  
Treasurer's Office  
70 Allen Street  
Pittsfield, MA 01201  
(413)448-9808

666/0244 Town of Randolph  
Michelle Hamelburg  
Town Hall  
41 South Main Street  
Randolph, MA 02368  
(781) 961-0903

666/0023 Town of Bedford  
Jessica Porter  
Assistant Town Manager  
10 Mudge Way  
Bedford, MA 01730  
(781) 275-1111

666/0262 Town of Saugus  
Jen Smith  
Benefits Coordinator  
298 Central Street—Town Hall  
Saugus, MA 01906  
(781) 231-4142

666/0046 Town of Brookline  
Christopher McLaughlin  
Benefits Administrator  
333 Washington St., Room 211  
Brookline, MA 02445  
(617) 730-2117

666/0503 Athol-Royalston Reg. Sch. Dist.  
Brenda Butland  
Accounts Payable Manager  
PO Box 968  
Athol, MA 01331  
(978) 249-2400

666/0134 Town of Holden  
Sharon Lowder  
Treasurer/Collector  
1204 Main Street  
Holden, MA 01520  
(508) 210-5512

666/0507 NE Regional Voc. Tech. School  
Nicole Wood  
Director of Benefits  
100 Hemlock Road  
Wakefield, MA 01880  
(781) 246-0810 x1646

666/0133 Town of Holbrook  
Jack Hoell  
Assistant Treasurer  
50 N. Franklin Street  
Holbrook, MA 02343-1560  
(781) 767-4316